2024 HOOPSTERS BASKETBALL PROGRAM REGISTRATION FORM

WHO'S ELIGIBLE TO PLAY: All full time students currently enrolled in Grades 3rd through 6th.

DIVISIONS AVAILABLE:

Boys: $3^{rd} - 4^{th}$ Grade & $5^{th} - 6^{th}$ Grade **Girls**: $3^{rd} - 4^{th}$ Grade & $5^{th} - 6^{th}$ Grade



Family Discounts Available: 2 children - \$65.00/each

\$5 Non-Resident Fee for each participant that lives outside Eureka City Limits.

Make Checks Payable to "City Of Eureka"

50%
Scholarships
Are
<u>Limited!</u>
First Come,
First Served
For Eligible
Families!

REGISTRATION: Registration form (Next Page) and fees are accepted by mail or in person at the *Community Services Department Office* located at the *Adorni Community Center*, 1011 Waterfront Drive, Eureka, 95501

Deadline dates are as follows:

All Grades—<u>Friday, December 15th</u>

(League May Fill Up Before Deadline)

*Deadline to apply as a coach is: Friday, <u>December 15th</u>

Special Requests & Carpooling Will Not Be Granted

Registration

QUESTIONS

CALL 41-4248

is on a First Come, First Served Basis and Will Depend on the Number of *Oualified*

Coaches!

TEAM ASSIGNMENTS:

Participants will be placed on a team based on the **Team Placement Criteria Form** found on page 3 of this packet. Rosters will be handed out to coaches on the following dates:

3rd-4th Grade: Friday, January 5th 5th-6th Grade: Friday, January 12th

Team Practices

Team practices are held weekly and vary by coach and grade level. Practice days and times are requested by the coach. Practice start dates will begin on the following dates:

<u>3rd-4th Grade</u>: Tuesday, January 16th <u>5th-6th Grade</u>: Monday, January 22nd

Games Begin:

3rd-4th Grade: Saturday, January 27th 5th-6th Grade: Saturday, February 3rd

Coaching & Sponsoring a Team

If you are interested in coaching or sponsoring a team, please fill out a coaches or sponsors reply form available at the Adorni Center or print one out online at Eureka Community Services > Recreation > Youth Sports.

President's Week

There will be no games on Saturday, February 24th.

"All kids need is a little help, a little hope and somebody who believes in them."

- Magic Johnson (NBA Hall of Famer)

HOOPSTERS 2024 REGISTRATION FORM

PARENTS/GUARDIAN: REGISTRATION IS ON A FIRST COME, FIRST SERVED BASIS AND WILL DEPEND ON THE NUMBER OF QUALIFIED COACHES. YOUR SIGNATURE IS REQUIRED!!

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the above city to participate in the above activity, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have or which may hereafter accrue as a result of my participation in said activity. This release is intended to discharge in advance the above city (its officers, employees, and agents) from and against any and all liability arising out of or connected in any way with my participation in said activity, even though that liability may arise out of negligence or carelessness on the part of said city (its officers, employees or agents).

I understand that the above activity may be of a hazardous nature and/or include physical and/or strenuous exercise or activity; that serious accidents occasionally occur during the above activity; and that participants in the above activity occasionally sustain mortal or personal injuries and/or property damages as a consequence thereof. Knowing the risks involved, nevertheless, I have voluntarily applied to participate in said activity and I hereby agree to assume any and all risks of injury or death and to release and hold harmless the city (its officers, employees, and agents) who through negligence, carelessness, or any other act or omission might otherwise be liable to me. I further understand and agree that this waiver, release, and assumption of risks is to be binding on my heirs and assigns.

I further agree to indemnify and to hold the above city (its officers, employees or agents) free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of any injury and/or property damage that I may sustain while participating in said activity.

I herby consent and authorize the City of Eureka permission to use all photographs of me and/or my child's image/voice to be used in any press release, publications, presentations, and/or advertisements, including but not limited to newsletters, brochures, public service announcements, posters, flyers, activity guides, websites or other forms of electronic or print literature related to the work of the City of Eureka's Community Services Department.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE CITY AND I SIGN IT OF MY OWN FREE WILL.

Participant (Child's) Name		FERRED DIVISION: MA	LE FEMALE
School)OB	Grade
PARENT'S NAME			
Address	Сіту		ZIP
PARENT/GUARDIAN SIGNATURE		TELEPHONE	
E-Mail			
PARENT AND/OR PARTICIPANT MISCONDUCT MAY RES			
** Special Requests or Ca	RPOOLING <u>WILL</u>	NOT BE GRANTE	:D * *
Medical History			
Known Allergies (Medications or specific foods)			<u> </u>
Medical Conditions: Asthma Diabetes Epileps	sy Other		
Emotional Challenges or Behaviors			
Additional Information (History or family situations)			
Coach/Sponsor Interest			
Coaches and Assistant Coaches are needed. Can you help?	Yes No		
Team sponsors are needed! Are you interested? (Team Spon	nsor Fee \$325.00) Yes	No	

** Special Requests or Carpooling Will Not Be Granted **

XL

or

Pledge

Adult:

S

M

Staff Initials

XL

Youth: M

Date

T-SHIRT SIZE (Circle One):

Receipt #

2024 HOOPSTERS TEAM PLACEMENT CRITERIA FORM

Your child will be assigned to a team by City of Eureka staff based on the following criteria and information. Every effort will be made to ensure teams are divided evenly based on skill set, experience, and preference. We cannot accommodate specific requests for individual teams. Our primary goal is ensuring that each child and team is set up for success for the most enjoyable and beneficial Hoopsters experience.

Head coaches, assistant coaches and team sponsors will each be allowed one automatic assignment per team.

Childs Name:
Grade:
How many years has your child been playing basketball?:
2. Has your child ever played on their school team? If yes, how many years?
3. What position would your child prefer to play in Basketball?
4. Does your child play other sports? If yes, which sports and for how long?
5. Does your child have any siblings in the <u>same grade division</u> ? Yes/No
5a. If so, what is there name & grade?
6. What is your child's height?
7. Skill level assessment: Please check the appropriate box that you feel best describes your child's skill level:
Beginner: My child has little to no experience and/or knowledge of the basic fundamentals of basketball: I.E- Dribbling, Passing, Shooting, Catching, Rebounding, Offense and Defense.
Intermediate: My child has some experience and knowledge of the basic fundamentals of basketball. My child can perform basic motor skills and movement patterns with or without equipment in a range of environments.
Advanced: My child has a good deal of experience and knowledge of the basic fundamentals of basketball. My child can perform confidently and efficiently in a range of movement environments, as well as effectively use strategic thinking and work with more and less skilled peers to improve game performance.